Learning the Lesson from 3 Million Lives – Update for National Assembly of Wales, Health and Social Care Committee

1.   Introduction

The UK Government Department of Health (DH) set up three large scale programmes to look at use of telecare and telehealth technology in different parts of England building on local project work that had been done in each of those areas. This was the Whole System Demonstrator (WSD) programme which at the time (2010), was the largest randomised control trial in the world.

The three sites were the London Borough of Newnham, Kent and Cornwall. The aim was to deliberately include a cross section representing urban, semi urban and rural communities. This WSD programme covered 6,191 patients and 238 GP practices.

Headline findings were reported from the WSD programme in December 2011 and included report of 45% reduction in mortality rates (chronic conditions); 20% reduction in emergency admissions; 15% reduction in elective admissions; 15% reduction in A& E visits; 14% reduction in bed days.

In addition, the DH estimates were that savings from the widespread use of telecare and telehealth could save the NHS up to £1.2 billion over five years. The estimate was that at least 3 million people with long term conditions and/or social needs could benefit from telecare and telehealth. Hence the birth of the '3 million lives' campaign.

Paul Burstow, Minister for Care Services in the UK Government at the time indicated a commitment to work with industry, to support the NHS, social care and professional partners in order to turn the vision of 3millionlives into reality. A Concordat was then published with the four trade associations representing the telehealth and telecare industry – The Association of British Healthcare Industries (ABHI), The Telecare Services Association (TSA), Intellect and Medilink UK.

A 3 million lives campaign website was set up: www.3millionlives.co.uk

2.   3 million lives objectives

- For Department of Health to create the right **macro environment** to support the uptake of telehealth and telecare including aligning the incentives for the NHS and social care and providing health and social care commissioners with the right **incentives** to commission telehealth and telecare as an integral part of care pathways.
- For industry to develop **new business models** and appropriate ways for the market to engage and for the NHS to commission telehealth and telecare services at scale.
- To **increase awareness and visibility** of the potential benefits of telehealth and telecare to stakeholders who commission and deliver services.
- To place a strong emphasis on **patient education** and empowerment, so that people are fully informed about the benefits that technology can provide in managing their health and care
- To place a strong emphasis on **supporting professionals** and leaders so that they are better able to understand the benefits that telehealth and telecare can bring to their patients and to their working practices.
- To put the NHS and UK industry at the forefront of telehealth and telecare globally; developing significant opportunities for UK plc

3.   Current position and lessons to learn

The partners in 3 million lives, including the industry body Telecare Services Association (TSA), have recognised that the initiative has not progressed as hoped, despite high profile launch from the UK Prime Minister David Cameron. There are a number of different reasons for this:

*   Some of the claims being made from the WSD programme were challenged by bodies such as the BMA, with a number of different articles published with specific criticisms

*   No final report on telecare impact was ever published under WSD – fuelling concerns that the methodology used was flawed or the results inconclusive

*   The approach taken was very top down – with little engagement of front line practitioners, so that there was little sense of ownership or engagement

*   More detailed analysis showed that positive outcomes were not wholly attributable to technology, but due to a number of factors (such as more regular clinician contact to support taking readings). Using a randomised control approach (so some patients received monitoring equipment and others did not) meant that there was some increase in hospital presentations from those who *did not* have equipment.

*   The three million lives approach was perceived as being very industry led and, as such, a 'sell' to care practitioners and service users/patients, with positives over emphasised and negatives glossed over.

*   Industry was asked to drive investment in technology – rather than practitioners and users/patients identify areas where technology could help them, and so inform the development of appropriate new technology

4.   Looking ahead

There has been learning from the 3 million lives initiative and there is a place for technology – centred on the individual, and being much more person centred – to support care. This month Professor Sir Bruce Keogh has outlined NHS England's plans for further developing Technology Enabled Care Services (TECS).

In a letter written to around 250 key stakeholders, NHS England's National Medical Director calls on them to support the programme that takes the NHS into a new and exciting technological era that will help empower patients and improve health outcomes. He states:

 "Imagine the degree of personal control that could be afforded by a smart phone configured for medical applications, coupled with wearable biosensors and capable of sensing, analysing and displaying vital signs and alerting you and your clinicians to significant changes or deterioration wherever you are, rather than through check-ups at a hospital or GP practice. Any escalation in a condition could be identified and addressed in a timely and proactive way. It would lead to better health outcomes while being more convenient for the patient, their carer and their clinician.

"This is the future of healthcare. Twenty years from now, we will use technology to access our health services as a matter of course. That future is fast approaching as technologies constantly evolve, adapt and improve."